In re Application of:

Docket No. 03137.000201.1

WILKINSON et al.

Application No.: 10/823,248

Filed: April 13, 2004

For: NATURAL GAS LIQUEFACTION

Examiner: W.C. Doerrler

Group Art Unit: 3744

Date: January 14, 2005

Mail Stop: Amendment

The Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

Sir:

Transmitted herewith is a Response to Restriction Requirement the above-identified application.

No additional fee is required.

The fee has been calculated as shown below

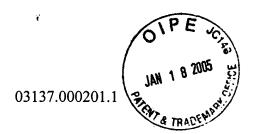
CLAIMS AS AMENDED								
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE		
TOTAL CLAIMS	*	MINUS	**	=	x \$25 \$50			
INDEP. CLAIMS	*	MINUS	***	=	x \$100 \$200			
Fee for Multiple Dependent claims \$180°/\$360								

If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

I hereby certify that this correspondence is being deposited with the United States Postal Service as first-class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on							
(Date of Deposit)							
Alicia A. Russo, Reg. No. 46,192 (Name of Attorney for Applicant)							

	Verified Statement claiming small entity status is enclosed, if not filed previously.					
	A check in the amount of \$ is enclosed.					
	Charge \$ to Deposit Account No. 06-1205. A duplicate cotthis sheet is enclosed.	py of				
X	Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 Deposit Account No. 06-1205 is hereby revoked. The Commissioner is here authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this parenclosed.	eby h may				
	A check in the amount of \$ to cover the fee for a rextension is enclosed.	nonth				
	A check in the amount of \$ to cover the Information Disclosur Statement fee is enclosed.	e				
X	Applicants' undersigned attorney may be reached in our New York office by telephone at (212) 218-2100. All correspondence should continue to be directed to our address given below.					
	Respectfully submitted,					
	John D. Murnane Registration No. 29,836					
	Alicia A. Russo Registration No. 46,192 Attorney for Applicants					

FITZPATRICK, CELLA, HARPER & SCINTO 30 Rockefeller Plaza
New York, New York 10112-3800
Facsimile: (212) 218-2200



PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:)	
••	:	Examiner: W.C. Doerrler
WILKINSON et al.		
	:	Group Art Unit: 3744
Application No.: 10/823,248)	
	:	
Filed: April 13, 2004)	
C NATUDAL CACLIQUEEA OTION	:	
For: NATURAL GAS LIQUEFACTION)	
		January 14 2005

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

RESPONSE TO RESTRICTION REQUIREMENT

Sir:

In response to the Office Action dated January 6, 2005, consideration of the following remarks is respectfully requested.

> I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on January 14, 2005

(Date of Deposit)

Alicia A. Russo, Reg. No. 46,192 (Name of Attorney for Applicant)

January 14, 2005 Date of Signature